

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼**

Example: If typing, type over the lines.

12FE4M5

Friends of Roy Cho Inc.

ADDRESS (number and street)

PO Box 247

☐ Check if different than previously reported. (ACC)

Hackensack

NJ

07601

2. **FEC IDENTIFICATION NUMBER ▼**

C C00544007

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

NJ

05

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2013

through

M M / D D / Y Y Y Y

09 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jennifer Cho

Signature of Treasurer Jennifer Cho

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10 / 15 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of Roy Cho Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	47540.00	128344.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	47540.00	128344.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	35792.03	49204.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	35792.03	49204.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	79139.98	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Friends of Roy Cho Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

40310.00

102910.00

(ii) Unitemized.....

6730.00

24934.00

(iii) TOTAL of contributions from individuals ▶

47040.00

127844.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

500.00

500.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

47540.00

128344.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

47540.00

128344.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 32

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35792.03	49204.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	35792.03	49204.02

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	67392.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	47540.00
25. SUBTOTAL (add Line 23 and Line 24).....	114932.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35792.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	79139.98

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Michael Alfano**Mailing Address **85 W Broadway**  
**Apt 14S**City State Zip Code  
**New York NY 10007-1070**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**LGT Capital Partners**Occupation  
**Investor**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2013

**Transaction ID : VN8KSAWEB80**

Amount of Each Receipt this Period

**250.00**

Full Name (Last, First, Middle Initial)

**Jonathan J Amoona**Mailing Address **222 E 34th St**  
**2103**City State Zip Code  
**New York NY 10016-4842**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**Winston and Strawn LLP**Occupation  
**Attorney**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2013

**Transaction ID : VN8KSAX6ZJ0**

Amount of Each Receipt this Period

**500.00**

Full Name (Last, First, Middle Initial)

**John Bang**Mailing Address **2422 Leighton St**City State Zip Code  
**Fort Lee NJ 07024-3910**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**Fahy Choi LLC**Occupation  
**Attorney**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

**Transaction ID : VN8KSAXQ394**

Amount of Each Receipt this Period

**250.00****SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**1000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Seung Koo Chang**

Mailing Address 15 Heritage Rd

City State Zip Code  
Old Tappan NJ 07675-7429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brian Brothers, Inc. President

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M	D D	Y Y Y Y
09	30	2013

Transaction ID : VN8KSAZ0SS0

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Cho**

Mailing Address 100 Maiden Ln  
Apt 2403

City State Zip Code  
New York NY 10038-0002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Marketing Director M2W, Inc.

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
2200.00

Date of Receipt

M M	D D	Y Y Y Y
07	29	2013

Transaction ID : VN8KSAE75B5

Amount of Each Receipt this Period

2200.00

\* In-Kind: Event at Parlor

**C.** Full Name (Last, First, Middle Initial)  
**Hyun Eun Choi**

Mailing Address 21970 64th Ave

City State Zip Code  
Bayside NY 11364-2246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt

M M	D D	Y Y Y Y
07	27	2013

Transaction ID : VN8KSACYXD8

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3400.00
---------

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Paul Y Choi**

Mailing Address 5805 Friars Rd

Apt 2105

City

San Diego

State

CA

Zip Code

92110-6007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Restaurant Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2013

Transaction ID : VN8KSACYX47

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Yong S. Choi**

Mailing Address 22 Southwood Dr

City

Cherry Hill

State

NJ

Zip Code

08003-2950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ2D3

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**Young Sang Choi**

Mailing Address 21970 64th Ave

City

Bayside

State

NY

Zip Code

11364-2246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bloomberg

Occupation

Information Requested

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2013

Transaction ID : VN8KSACYXC0

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

2700.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Golodny**

Mailing Address 20 Hilldale Rd

City State Zip Code  
Albertson NY 11507-2212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Steptoe & Johnson LLP Attorney

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : VN8KSAYZA02

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
**Eli Goodman**

Mailing Address 235 W 56th St  
Apt 23P

City State Zip Code  
New York NY 10019-4331

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
comScore Sales

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : VN8KSAYXA97

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jong Uk Hong**

Mailing Address 1512 Palisade Ave  
10E

City State Zip Code  
Fort Lee NJ 07024-5308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sanwoo LLP Partner - CPA

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ337

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Hong Sik Hun**

Mailing Address **770 Anderson Ave**  
**Apt 3P**

City **Cliffside Park** State **NJ** Zip Code **07010-2136**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Bank Asiana** Occupation **Banker**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

M M	D D	Y Y Y Y
09	22	2013

Transaction ID : VN8KSAXQ2T6

Amount of Each Receipt this Period

250.00
--------

**B.** Full Name (Last, First, Middle Initial)  
**Sang Won Im**

Mailing Address **1192 Longmeadow Ln**

City **Yardley** State **PA** Zip Code **19067-4700**

FEC ID number of contributing federal political committee. **C**

Name of Employer **7-11 Franchise** Occupation **Owner**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt

M M	D D	Y Y Y Y
09	30	2013

Transaction ID : VN8KSAZ0PH0

Amount of Each Receipt this Period

300.00
--------

**C.** Full Name (Last, First, Middle Initial)  
**Heasuk Lee Jtwros**

Mailing Address **15 Lone Cedar Way**

City **Old Tappan** State **NJ** Zip Code **07675-7462**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NA** Occupation **Homemaker**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **1760.00**

Date of Receipt

M M	D D	Y Y Y Y
09	22	2013

Transaction ID : VN8KSAXQ6K9

Amount of Each Receipt this Period

1760.00
---------

\* In-Kind: Event - BK Lee Home

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2310.00
---------

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Chan Yong Jung**

Mailing Address 224-21 Horace Hading Expwy  
 1st Floor

City	State	Zip Code
Oakland Gardens	NY	11364

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Wholesaler

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		05		2013

Transaction ID : VN8KSACYX97

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Dong Hwan Kim**

Mailing Address 603 Knottingham Ct

City	State	Zip Code
Norwood	NJ	07648-2300

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Powerline Imports Inc.

Occupation  
President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ2V3

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Jay J. Kim**

Mailing Address 319 Truman Dr

City	State	Zip Code
Cresskill	NJ	07626-1725

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
International Pursuit Corp

Occupation  
President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ2S8

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Min L. Kim**

Mailing Address 18 Locust Ln

City

East Rutherford

State

NJ

Zip Code

07073-1014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ3A2

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Moon Sook Kim**Mailing Address 1512 Palisade Ave  
Apt 7P

City

Fort Lee

State

NJ

Zip Code

07024-5311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ3D6

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Seung Hwan Kim**

Mailing Address 183 Wood Rd

City

Englewood Cliffs

State

NJ

Zip Code

07632-1637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Newnissi CorpOccupation  
President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ386

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

7200.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Su Nyun Kim**

Mailing Address 76 Columbus Dr

City

Tenafly

State

NJ

Zip Code

07670-1622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Transwestern

Occupation

Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ378

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**TaeHun Kim**

Mailing Address 111 Essex Dr

City

Tenafly

State

NJ

Zip Code

07670-2331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HSBC

Occupation

Banker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2013

Transaction ID : VN8KSAY5PG8

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**Woo Kwan Kim**

Mailing Address 1495 Joy Cir

City

Yardley

State

PA

Zip Code

19067-4405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Self Employed

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ226

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2850.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 32

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Tae J. Kwon**

Mailing Address **61 W Overlook**

City **Port Washington** State **NY** Zip Code **11050-4701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tae J Kwon Attorney** Occupation **Lawyer**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

M M	D D	Y Y Y Y
09	22	2013

**Transaction ID : VN8KSAXQ268**

Amount of Each Receipt this Period

500.00
--------

**B.** Full Name (Last, First, Middle Initial)  
**Byungkuk Lee**

Mailing Address **15 Lone Cedar Way**

City **Old Tappan** State **NJ** Zip Code **07675-7462**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Leeward International Inc** Occupation **CEO**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt

M M	D D	Y Y Y Y
09	22	2013

**Transaction ID : VN8KSAXQ275**

Amount of Each Receipt this Period

1000.00
---------

**C.** Full Name (Last, First, Middle Initial)  
**Byungkuk Lee**

Mailing Address **15 Lone Cedar Way**

City **Old Tappan** State **NJ** Zip Code **07675-7462**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Leeward International Inc** Occupation **CEO**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt

M M	D D	Y Y Y Y
09	22	2013

**Transaction ID : VN8KSAXQ5E7**

Amount of Each Receipt this Period

1600.00
---------

\* In-Kind: Event - BK Lee Home

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3100.00
---------

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Eun Lee**

Mailing Address 12 Dickel Rd

City

Scarsdale

State

NY

Zip Code

10583-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ329

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Hai Soon Lee**

Mailing Address 82 Douglas Dr

City

Towaco

State

NJ

Zip Code

07082-1543

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2013

Transaction ID : VN8KSACYX06

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Keunman Lee**

Mailing Address 453 George St

City

Ridgewood

State

NJ

Zip Code

07450-1707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ311

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Keunman Lee**

Mailing Address 453 George St

City

Ridgewood

State

NJ

Zip Code

07450-1707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : VN8KSAZ0PK6

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Brian Leung**

Mailing Address 906 W Glebe Rd

City

Alexandria

State

VA

Zip Code

22305-1462

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Arent Fox LLP

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2013

Transaction ID : VN8KSAWDVN9

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Joon Mo Lim**

Mailing Address 1421 Southwind Way

City

Dresher

State

PA

Zip Code

19025-1025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Dry Cleaner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : VN8KSAZ0PF4

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Don Liu**

Mailing Address **8 Joanne Cir**

City **Westport** State **CT** Zip Code **06880-2633**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Xerox Corp** Occupation **attorney**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2013

**Transaction ID : VN8KSAX7B36**

Amount of Each Receipt this Period

**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Aleksandr Livshits**

Mailing Address **15 Cliff St**  
**Apt 5F**

City **New York** State **NY** Zip Code **10038-2861**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Fried Frank Harris Shriver & Jacobson** Occupation **Lawyer**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2013

**Transaction ID : VN8KSAQ7X73**

Amount of Each Receipt this Period

**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Doug M. Ma**

Mailing Address **20 Palmer Ave**

City **Tenafly** State **NJ** Zip Code **07670-2508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Information Requested** Occupation **Physician**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

**Transaction ID : VN8KSAXQ2P4**

Amount of Each Receipt this Period

**500.00****SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

<b>1250.00</b>
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Gloria Oh</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2013	
Mailing Address 210 Sylvan Ave 210 Sylvan Avenue		<b>Transaction ID : VN8KSAXQ2G7</b>	
City Englewood Cliffs	State NJ	Zip Code 07632-2524	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer ASAP Title Agency	Occupation Attorney/Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Hai Wha Pak</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2013	
Mailing Address 1100 Madison Ave Apt 3E		<b>Transaction ID : VN8KSAAP62</b>	
City New York	State NY	Zip Code 10028-0338	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Keun Jip	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Jean Park</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2013	
Mailing Address 43 Morris Dr		<b>Transaction ID : VN8KSACYXJ8</b>	
City New Hyde Park	State NY	Zip Code 11040-3727	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Painting Store	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1750.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Kyung Suk Park**

Mailing Address 60 Arleigh Dr

City State Zip Code  
Albertson NY 11507-1208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RHM Apparels, Inc President

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

**Transaction ID : VN8KSAXQ2E1**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Roth**

Mailing Address 144 Boulevard

City State Zip Code  
Mountain Lakes NJ 07046-1201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2013

**Transaction ID : VN8KSAHREE8**

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kaleb Sanchez**

Mailing Address 4705 Center Blvd  
Apt 1205

City State Zip Code  
Long Island City NY 11109-5678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mayer Brown Attorney

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

**Transaction ID : VN8KSAYV6D5**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 32

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Elizabeth Serio**Mailing Address 2201 L St NW  
Apt 806

City	State	Zip Code
Washington	DC	20037-1413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clifford Chance US LLPOccupation  
Attorney

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : VN8KSAYXPS9

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Yeong S. Shim**

Mailing Address PO Box 1144

City	State	Zip Code
Alpine	NJ	07620-1144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Self Employed

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ242

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Stephen Shueh**Mailing Address 182 Nassau St  
Ste 201

City	State	Zip Code
Princeton	NJ	08542-7000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roundview CapitalOccupation  
Managing Partner

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2013

Transaction ID : VN8KSAXZ4K7

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Robert Starin**Mailing Address **7 Brookcrest Ct**

City

Rockville

State

MD

Zip Code

20854-5501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

United States Department of Commerce

Occupation

Statistician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : VN8KSAYVCQ6

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**Michael Suh**Mailing Address **1628 Hudson Park**

City

Edgewater

State

NJ

Zip Code

07020-1570

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Businessman

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXRG30

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**Seung K. Yoo**Mailing Address **1714 Amsterdam Ave**

City

New York

State

NY

Zip Code

10031-4602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Miskins Drug Store

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ2X9

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2650.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**Doug Yoon**

Mailing Address 39 Bentley Dr

City

Franklin Lakes

State

NJ

Zip Code

07417-1940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Law Offices of Doug J. Yoon

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ2M8

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Jong S. Yoon**Mailing Address 900 Palisade Ave  
Apt 2101

City

Fort Lee

State

NJ

Zip Code

07024-4141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jeice Fashion Inc.

Occupation

Businessman

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2013

Transaction ID : VN8KSAXQ2H4

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Young S Yu**Mailing Address 2740 Hoyt Ave S  
14G

City

Astoria

State

NY

Zip Code

11102-2035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Major Textiles, Inc

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2013

Transaction ID : VN8KSACYXB2

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

40310.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 32

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)  
**FRIENDS OF BYRON DORGAN**

Mailing Address **818 Connecticut Ave NW**  
**Ste 1100**

City State Zip Code  
**Washington DC 20006-2702**

FEC ID number of contributing  
federal political committee.

**C** **C00143438**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**500.00**

Date of Receipt

**07 / 23 / 2013**

**Transaction ID : VN8KSAC7700**

Amount of Each Receipt this Period

**500.00**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**

**500.00**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Roy Cho Inc.

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address Massachusetts Ave

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Train Tickets

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2013

Amount of Each Disbursement this Period

183.60
--------

Transaction ID : VN7MH9JE928

Train Tickets

**B. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City	State	Zip Code
Phoenixville	PA	19460-3512

Purpose of Disbursement  
Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2013

Amount of Each Disbursement this Period

1750.00
---------

Transaction ID : VN7MH9JX5P6

Consulting

**c. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City	State	Zip Code
Phoenixville	PA	19460-3512

Purpose of Disbursement  
Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2013

Amount of Each Disbursement this Period

1750.00
---------

Transaction ID : VN7MH9JX5M1

Consulting

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3683.60

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**A. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City Phoenixville State PA Zip Code 19460-3512

Purpose of Disbursement  
Cell Phone Reimbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	30	2013

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : VN7MH9JX5N8

Cell Phone Reimbursement

**B. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City Phoenixville State PA Zip Code 19460-3512

Purpose of Disbursement  
Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
08	15	2013

Amount of Each Disbursement this Period

1750.00
---------

Transaction ID : VN7MH9KKWS1

Consulting

**c. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City Phoenixville State PA Zip Code 19460-3512

Purpose of Disbursement  
Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
08	30	2013

Amount of Each Disbursement this Period

1750.00
---------

Transaction ID : VN7MH9KKWT9

Consulting

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3575.00
---------



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**A. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City Phoenixville State PA Zip Code 19460-3512

Purpose of Disbursement  
Phone Reimbursement

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	30	2013

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : VN7MH9KKWV6

Phone Reimbursement

**B. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City Phoenixville State PA Zip Code 19460-3512

Purpose of Disbursement  
Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	15	2013

Amount of Each Disbursement this Period

1750.00
---------

Transaction ID : VN7MH9KKWW4

Consulting

**C. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City Phoenixville State PA Zip Code 19460-3512

Purpose of Disbursement  
Consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	30	2013

Amount of Each Disbursement this Period

1750.00
---------

Transaction ID : VN7MH9KMMK3

Consulting

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3575.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**A. Renee Broberg**Mailing Address 121 Jackson St  
Unit B

City Phoenixville State PA Zip Code 19460-3512

Purpose of Disbursement  
Cell Phone Reimbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
09	30	2013

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : VN7MH9KMMN9

Cell Phone Reimbursement

**B. Jennifer Cho**Mailing Address 100 Maiden Ln  
Apt 2403

City New York State NY Zip Code 10038-0002

Purpose of Disbursement  
Event at Parlor

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	29	2013

Amount of Each Disbursement this Period

2200.00
---------

Transaction ID : VN8KSAE75B5I

\* In-Kind Received

**C. Genova Burns Giantomasi Webster**

Mailing Address 494 Broad St

City Newark State NJ Zip Code 07102-3229

Purpose of Disbursement  
Compliance Attorney

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	09	2013

Amount of Each Disbursement this Period

2012.50
---------

Transaction ID : VN7MH9JB612

Compliance Attorney

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4287.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**A. Genova Burns Giantomasi Webster**

Mailing Address 494 Broad St

City	State	Zip Code
Newark	NJ	07102-3229

Purpose of Disbursement  
Compliance Attorney

001

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2013

Amount of Each Disbursement this Period

805.50

Transaction ID : VN7MH9JDTF9

Compliance Attorney

**B. Genova Burns Giantomasi Webster**

Mailing Address 494 Broad St

City	State	Zip Code
Newark	NJ	07102-3229

Purpose of Disbursement  
Compliance Attorney

001

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		09		2013

Amount of Each Disbursement this Period

397.50

Transaction ID : VN7MH9K2EP5

Compliance Attorney

**C. Genova Burns Giantomasi Webster**

Mailing Address 494 Broad St

City	State	Zip Code
Newark	NJ	07102-3229

Purpose of Disbursement  
Compliance Attorneys

001

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2013

Amount of Each Disbursement this Period

42.50

Transaction ID : VN7MH9KJGJ3

Compliance Attorneys

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1245.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**A. Heasuk Lee Jtwros**

Mailing Address 15 Lone Cedar Way

City	State	Zip Code
Old Tappan	NJ	07675-7462

Purpose of Disbursement  
Event - BK Lee Home

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2013

Amount of Each Disbursement this Period

1760.00
---------

Transaction ID : VN8KSAXQ6K9I

\* In-Kind Received

**B. Byungkuk Lee**

Mailing Address 15 Lone Cedar Way

City	State	Zip Code
Old Tappan	NJ	07675-7462

Purpose of Disbursement  
Event - BK Lee Home

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2013

Amount of Each Disbursement this Period

1600.00
---------

Transaction ID : VN8KSAXQ5E7I

\* In-Kind Received

**C. New Partners**Mailing Address 1250 I St NW  
Ste 200

City	State	Zip Code
Washington	DC	20005-5977

Purpose of Disbursement  
General Consulting Group

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2013

Amount of Each Disbursement this Period

5172.03
---------

Transaction ID : VN7MH9JDTG7

General Consulting Group

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8532.03

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Roy Cho Inc.

Full Name (Last, First, Middle Initial)

**A. New Partners**Mailing Address 1250 I St NW  
Ste 200

City Washington State DC Zip Code 20005-5977

Purpose of Disbursement  
Consulting

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	05	2013

Amount of Each Disbursement this Period

6224.60

Transaction ID : VN7MH9JZWX6

Consulting

**B. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	03	2013

Amount of Each Disbursement this Period

499.95

Transaction ID : VN7MH9KMKR2

Credit Card Processing Fee

**C. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	03	2013

Amount of Each Disbursement this Period

175.93

Transaction ID : VN7MH9KMKS0

Credit Card Processing Fee

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6900.48

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**A. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	03	2013

Amount of Each Disbursement this Period

30.95
-------

Transaction ID : VN7MH9KMKT8

Credit Card Processing Fee

**B. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
08	05	2013

Amount of Each Disbursement this Period

256.00
--------

Transaction ID : VN7MH9KMKV6

Credit Card Processing Fee

**C. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
08	05	2013

Amount of Each Disbursement this Period

42.86
-------

Transaction ID : VN7MH9KMKX2

Credit Card Processing Fee

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

329.81

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**A. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	05	2013

Amount of Each Disbursement this Period

34.85
-------

Transaction ID : VN7MH9KMKY0

Credit Card Processing Fee

**B. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	03	2013

Amount of Each Disbursement this Period

46.30
-------

Transaction ID : VN7MH9KMKZ7

Credit Card Processing Fee

**C. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	03	2013

Amount of Each Disbursement this Period

30.95
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Transaction ID : VN7MH9KMM05

Credit Card Processing Fee

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

112.10

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 32

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Roy Cho Inc.**

Full Name (Last, First, Middle Initial)

**A. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
09	03	2013

Amount of Each Disbursement this Period

29.43
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Transaction ID : VN7MH9KMM13

Credit Card Processing Fee

**B. NGP VAN**Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
NGP VAN

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
09	24	2013

Amount of Each Disbursement this Period

2100.00
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Transaction ID : VN7MH9KKX22

NGP VAN

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2129.43
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34370.45
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